

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No.: 10/771,798  
Applicant(s): Terrell B. Jones et al.  
Filed: February 4, 2004  
Art Unit: 3661  
Examiner: Hernandez, Olga  
Title: PROCESS TO GRAPHICALLY DISPLAY TRAVEL  
INFORMATION ON A MAP IN ELECTRONIC FORM

Confirmation No.: 3348

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**SEP 09 2004**

Docket No.: 043474/258903  
Customer No.: 00826

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**  
**37 C.F.R. § 1.121**

Sir:

In response to the Office Action dated August 2, 2004, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims beginning on page 2 of this paper.

**Remarks** begin on page 7 of this paper.

SEP 09 2004

Attorney's Docket No. 043474/258903

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 Group Art Unit: 3661  
 Examiner: Olga Hernandez

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 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Transmitted herewith is an AMENDMENT in the above-identified patent application.

- ☐ Applicant claims small entity status. See 37 C.F.R. § 1.27.  
☐ No additional fee is required.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
TOTAL	* 31	** 25	= 6	X 9=	\$	X 18=	\$ 108.00
INDEP	* 5	*** 5	= 0	X 43=	\$	X 86=	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+145=	\$	+290=	\$
				TOTAL ADD FEE \$		OR TOTAL	\$ 108.00

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

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Atty. Dock. No. 043474/258903  
Page 2

- ☒ Please charge my Deposit Account No. 16-0605 in the amount of \$108.00.
- ☐ A check in the amount \$ to cover the additional fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiency in payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0605.
- ☒ Any additional filing fees required under 37 C.F.R. § 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17.

Respectfully submitted,

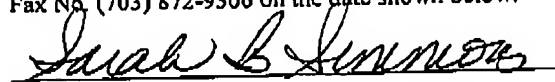


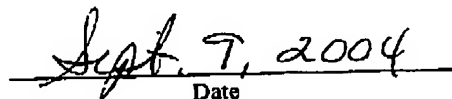
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DATE: September 9, 2004

**TO: UNITED STATES PATENT AND TRADEMARK OFFICE  
ART UNIT 3661**

Andrew T. Spence  
Reg. No. 45,699

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Examiner: Olga Hernandez

Please process the attached Amendment (8 pages) and the Amendment cover sheet (2 pages) and fax confirmation of receipt to Andrew T. Spence at 704-444-1111. Thank you.

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